



LONGRICH AMERICA INT'L, INC.

14769 Carmenita Rd., Norwalk, CA 90650 U.S.A.

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LongrichAmerica.com

IBO INFORMANTION CHANGE REQUEST FORM

This form may be submitted by an Independent Business Owner (IBO) who wishes to update their Federal Tax ID, Social Security Number (SSN), or personal information on his or her account. Account status and/or rank is not affected as this Information Change Request is not considered as a Transfer of Ownership. This form is only used to update pertinent personal information. Information with asterisk (*) is required.

Please submit form to Longrich America, 17100 Pioneer Blvd. #220, Artesia, CA 90701 or fax to 562-809-1681.

*IBO ID#

EXISTING DETAILS

Please ONLY enter the existing details that you want to CHANGE.

First Name:	Last Name:	Complete if a business entity:	
SSN:	DOB:	Business Name:	EIN:
Street Address:			
City:	State:	Zip Code:	Country:
Daytime Phone:	Evening Phone:	Email:	

Independent Business Owner (IBO) acknowledges that they will remain responsible for all commissions earned on the account for the current calendar year and will be issued of 1099 as changes to the member information does not remove the account holder from their tax obligation stemming from this account.

NEW DETAILS

Please ONLY enter the NEW details that you want to CHANGE.

First Name:	Last Name:	Complete if a business entity:	
SSN:	DOB:	Business Name:	EIN:
Street Address:			
City:	State:	Zip Code:	Country:
Daytime Phone:	Evening Phone:	Email:	

* Reason for requesting the information change:

I understand that completion and submission of this form is only a request to edit personal information. I acknowledge that the completion of this form does not constitute a sale and/or transfer of ownership for this account, which I am currently the owner. I understand that I will be responsible for this account, including but not limited to commissions, taxes, outstanding balance, etc.

- When submitting the request, please include a copy of the account holder's photo ID (US Driver's License, Passport, or other forms of photo ID).
- Request for the Information Change will be processed within a week from the time all pertinent document is received.
- Longrich America reserves the right to approve or deny the information change request at its own discretion.

I fully acknowledge and agree to Longrich America's Policies & Procedures and accept the Terms & Conditions.

* IBO's Signature

* IBO Name (Please Print)

*Date

FOR OFFICE USE ONLY

Received and Checked by:	Date:	Approved and Edited by:	Date:
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